DEPARTMENT OF PESTICIDE REGULATION PEST MANAGEMENT AND LICENSING BRANCH LICENSING AND CERTIFICATION PROGRAM 1001 I STREET SACRAMENTO, CALIFORNIA 95814-2828

(916) 445-4038 FAX - (916) 445-4033

Web site: http://www.cdpr.ca.gov

PESTICIDE BROKER LICENSE PACKET

Contains the following documents:

- Application & Instructions
- Fact Sheet
- Visa/Mastercard Transaction Form
- Customer Service Survey Form

State of California
PESTICIDE BROKER LICENSE
LICENSING REQUIREMENTS
REV. 02/04

DEPARTMENT OF PESTICIDE REGULATION
PEST MANAGEMENT AND LICENSING BRANCH
1001 I Street
P.O. Box 4015

Sacramento, California 95812-4015

Phone: (916) 445-4038 Fax: (916) 445-4033 Web site at http://www.cdpr.ca.gov

Retain for your information.

Do You Need This License?

If you are a person or business, whether inside or outside of California, who first sells or distributes pesticides labeled for agricultural use within California, you must possess a pesticide broker license. If you sell an agricultural use pesticide or sell any method or device for the control of agricultural pests, such as biologicial agents, lures or insect trapping devices, to the end user, you must be licensed as a pest control dealer business [Food and Agricultural Code (FAC) section11407]. The definition of agricultural use will help you to decide whether you need a pesticide broker license or not. California's definition includes but is not limited to commercial production of animals or plants, golf courses, parks, cemeteries, roadsides, power line rights-of-way, and nurseries.

Registrants selling their own pesticide products and licensed pest control dealers are excluded from this license requirement.

Basic Licensing Requirements

A pesticide broker license is obtained by submitting the application and appropriate fee.

Once You've Become Licensed

You must maintain records of all purchases, sales, and distributions of pesticides within the state for four years at the principle place of business. You must report to the Director, the total dollars of sales and total pounds or gallons sold into or within California of pesticides intended for agricultural use on a quarterly basis FAC section 12406(a)(b).

If the registrant has not paid the mill assessment, the pesticide broker or pest control dealer must pay the quarterly assessment to the Director of the Department of Pesticide Regulation [FAC section 12406(b)].

Licensing, Renewal, and Other Fees

Application Fee

If you are applying for a pesticide broker license, the license fee is \$110.00 [Title 3, California Code of Regulations (3CCR) section 6502]. The pesticide broker branch office license fee is \$60.00. The license fee is based on the licensing cycle provided below. For example, if the business applied for a license under the name "Pesticide Broker Corporation" in January 2004, it would expire on December 31, 2005 and the fee for the license would be \$220.00 for the principle location and \$120 for each branch location. If the business applied for a license under the name "Best Buy Brokers" in January 2004, it would expire on December 31, 2004 and the fee for the license would be \$110.00 for the principle location and \$60 for each branch location.

- The license of businesses with names beginning with **A** through **L** expire on December 31 of evennumbered years (i.e., 2004, 2006, 2008, etc.)
- The license of businesses with names beginning with **M** through **Z** expire on December 31 of odd-numbered years (i.e., 2005, 2007, 2009, etc.)

License Renewal Fee

The license renewal fee is \$110.00 per calendar year, to be paid to DPR every two (2) years for a total cost of \$220.00 (3CCR section 6502) for a two-year license. The pesticide broker branch renewal fee is \$60.00 per calendar year, to be paid every two years for a total of \$120.00. The two-year license renewal fee is not prorated if the license is renewed late.

Late Renewal Fee

A late fee of fifty percent (50%) of the total renewal fee will be assessed for each license postmarked after December 31 of the expiration year.

Name/Address Change and Duplicate/Replacement Fees

A fee of \$20 is required for name changes, as well as requests for a duplicate or replacement license. DPR will not issue a new license when an address change is received unless requested by the business and accompanied by the \$20 fee. A maximum fee of \$20 is required for all name and/or address changes or requests for a duplicate or replacement license when submitted on a single application form.

Every person or business to whom a license is issued must notify the Licensing and Certification Office in writing of any name and/or address change.

- Legal documents certifying the name change and a fee of \$20 are required in order to make a name change. A new license will be automatically issued for all name changes.
- The change of name and address requirement form is available on DPR's website at http://www.cdpr.ca.gov/docs/license/lcforms.htm or by calling (916) 445-4038. A \$20 fee for an address change is **only** required when the licensee requests a new license.

General Information

Timelines for Processing Applications

DPR has established time periods for processing permit applications, in compliance with Government Code sections 15374-15378. DPR may take up to 100 days to complete the processing of this application. Failure to comply with these time periods may be appealed to the Agency Secretary, California Environmental Protection Agency, P.O. Box 2815, 1001 I Street, Sacramento, California 95814, pursuant to regulations set forth in 3CCR section 301. Under certain circumstances, the Agency Secretary may order that the applicant receive a reimbursement of filing fees.

License Duration

A new license may be issued for a maximum of two years. The license duration is dependent on the date your license was issued and your renewal cycle. Each renewed license is valid for two (2) years unless renewed late.

The Most Common Mistakes and How to Avoid Them

The most common application errors made are incorrect fees, and not submitting renewals in a timely manner. You can avoid these errors by reading the application instructions carefully, and mailing your application to DPR on or before the expiration date of the license. If you have questions regarding any information, call for assistance.

DPR Licensing and Certification Location

Department of Pesticide Regulation Pest Management and Licensing Branch Licensing and Certification Program 1001 I Street Sacramento, CA 95814-2828

Questions

Call: (916) 445-4054

Email: licensing-business@cdpr.ca.gov

STATE OF CALIFORNIA PESTICIDE BROKER LICENSE APPLICATION

5) LOCATION ADDRESS (Number and Street or P.O. Box Number)

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(916) 445-4038 FAX - (916) 445-4033 Web site: http://www.cdpr.ca.gov/

(ZIP Code)

(State)

A. Application Type. Check the appropriate box(es). **NEW APPLICATION** OTHER (Specify) NAME / ADDRESS CHANGE ADD BRANCH LOCATION **DUPLICATE / REPLACEMENT LICENSE BUSINESS LICENSE #** B. Business Information (Main Location). Please print or type. **BUSINESS NAME** FAX NUMBER TELEPHONE NUMBER EMAIL ADDRESS BUSINESS MAILING ADDRESS (Number and Street or P.O. Box Number) (City) (County) (State) (ZIP Code) BUSINESS LOCATION ADDRESS (Number and Street) (City) (State) (ZIP Code) (County) BUSINESS TYPE (Check only one box.) See instructions for documentation requirements. CORPORATION **INDIVIDUAL** LIMITED LIABILITY COMPANY OTHER **PARTNERSHIP** NON-PROFIT ASSOCIATION LIMITED LIABILITY PARTNERSHIP C. Former Business Name. Enter former business name below. FORMER BUSINESS NAME D. Business Officers or Owners. Attach additional sheet if necessary. 1) NAME TITLE MAILING ADDRESS (Number and Street or P.O. Box Number) (ZIP Code) (City) (State) 2) NAME TITLE MAILING ADDRESS (Number and Street or P.O. Box Number) (State) (ZIP Code) (City) 3) NAME TITLE MAILING ADDRESS (Number and Street or P.O. Box Number) (ZIP Code) (State) (City) E. Branch Locations. Attach additional sheet if necessary. (City) (County) (State) (ZIP Code) 1) LOCATION ADDRESS (Number and Street or P.O. Box Number) 2) LOCATION ADDRESS (Number and Street or P.O. Box Number) (City) (County) (State) (ZIP Code) 3) LOCATION ADDRESS (Number and Street or P.O. Box Number) (ZIP Code) (City) (State) (County) (State) (ZIP Code) 4) LOCATION ADDRESS (Number and Street or P.O. Box Number) (City) (County)

(County)

(City)

STATE OF CALIFORNIA

PESTICIDE BROKER LICENSE APPLICATION

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F. Pesticide Broker B	usiness Type.					
Indicate the type of pe	sticides your business will be se	lling by checking the	ap	propriate b	ox(es) below.	
Agricultural Use P	esticides			Tributyltin		
Non-agricultural U	se Pesticides		Livestock/	Poultry Pesticides		
Restricted Use Pe	sticides (Either California or Fed	eral)		Biological	Control Agents	
Other						
G. Fees. All fees are	non-transferable and non-refu	ndable.				
Main Location Branch Location Name/Address Change Total Fee(s) Du	e, Duplicate/Replacement Fee e/Enclosed	1-Year ☐ \$110 or ☐ \$60 or ☐ \$20		<u>Year</u> \$220 \$120 x x	#Branches 	Total Fees = \$ = \$ \$ \$
Regulation. Mail your	ey order or credit card paymer completed application, required on nento, California 95812-4015.					
	ng. During the last three years, te or federal laws or regulations action is pending?					
YES (State explan	ation below.)			NO		
I. I declare under pen	alty of perjury, under laws of t	he State of Califori	nia,	that the ab	oove information	is true and correct.
FOR OFFICIAL USE ONLY	UMBER			COMPUTER EN	TRY DATE	RC ENTRY DATE

STATE OF CALIFORNIA

application.

PESTICIDE BROKER LICENSE APPLICATION INSTRUCTIONS

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- 3		
A.	Applica	New Application : If you are applying for the Pesticide Broker License for the first time.
		Add Branch Location: Adding a pesticide broker branch location to your license.
		Duplicate/Replacement License: Requesting a duplicate or replacement license.
		Name/Address Change : Requesting name/address changes. Submit a copy of the legal document substantiating the name change. Address changes may be made directly on the application form. A new license will not be printed for an address change only unless specifically requested and a \$20 fee submitted with the application.
		Other: Any other change, please specify the change.
B.	your bu	ss Information (Main Location). Complete the information requested in this section. If you are changing siness name, enter your former business name in Section "C". If there is a change in business name or you must immediately notify the Director in writing. If your business is a:
		Corporation , submit a current copy of the "Certificate of Good Standing" which may be obtained from the Secretary of State, Certificate Department, 1500 11 th Street, Sacramento, California 95814.
		Limited Liability Company or Limited Liability Partnership, submit a current copy of the "Certificate of Good Standing" which may be obtained from the Secretary of State, Certificate Department, 1500 11 th Street, Sacramento, California 95814.
		Partnership , submit a "Fictitious Business Name Statement" which may be obtained from the county clerk's office.
		Individual , if the business name is different than your surname (last name), submit a "Fictitious Business Name Statement" which may be obtained from the county clerk's office.
	П	Non-Profit Association if the business is a corporation submit a current copy of the "Certificate of Good

C. **Former Business Name.** If your business name has changed, enter the former name in this section of the

"Fictitious Business Name Statement" which may be obtained from the county clerk's office.

D. **Business Officers or Owners.** List the name, title, and mailing address of the business officers and/or owners. If necessary, use an additional sheet of paper. If there is a change in the business ownership or organization, notify the Director immediately in writing. A new application and fee must be submitted for this change.

Standing" which may be obtained from the Secretary of State, Certificate Department, 1500 11th Street, Sacramento, California 95814. If the business name is different than your surname (last name), submit a

- E. Branch Locations. Complete this section to add a branch location to your business. Enter the business location address for each branch location added. If the branch name is different from the main business name, indicate the branch name and submit a "Fictitious Business Name Statement" which may be obtained from the county clerk's office.
- F. Pesticide Broker Business Type. Indicate the type of pesticides the business will be selling. Check all that apply.
- G. Fees. All fees are non-transferable and non-refundable.

 Main Location:
 \$110
 \$220

 Branch Location:
 \$60
 \$120

Name/Address Change Fee: \$20 (See Note) Duplicate/Replacement Fee: \$20 (See Note)

PESTICIDE BROKER LICENSE APPLICATION INSTRUCTIONS

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NOTE: A fee for an address change is only required when the licensee requests a new license be issued (printed and mailed). A maximum fee of \$20 is due for all name/address changes and requests for a duplicate/replacement licenses submitted on a single application.

* The following information and table will assist you in determining the appropriate application fee.

New Application Fee Schedule Example:

Year Submitting Application	License Name	License Expiration Year	Main License Application Fee	Branch License Application Fee		
2004	A-L	2004	\$110	\$60		
	M-Z	2005	\$220	\$120		
2005	A-L	2006	\$220	\$120		
	M-Z	2005	\$110	\$60		
2006	A-L	2006	\$110	\$60		
	M-Z	2007	\$220	\$120		

If your business name begins with **A - L**, the expiration date of the business license is on **even-numbered** years. If your business name begins with **M - Z**, the expiration date of the business license is on **odd-numbered** years.

- H. Read Before Signing. Check appropriate box.
- I. **Declaration/Signature Block**. Sign and date your application. Enclose a check, money order or credit card payable to "Cashier, DPR" and mail to: Cashier, Department of Pesticide Regulation, P.O. Box 4015, Sacramento, California 95812-4015.

LICENSE NO.

STATE OF CALIFORNIA
DEPARTMENT OF PESTICIDE REGULATION



1001 I STREET SACRAMENTO, CALIFORNIA 95814-2828 (916) 445-4038

PESTICIDE BROKER LICENSE

THIS LICENSE EXPIRES

= POST THIS LICENSE PROMINENTLY IN PUBLIC VIEW =
THIS LICENSE IS NOT TRANSFERABLE - ANY CHANGE IN OWNERSHIP REQUIRES A NEW LICENSE

Who Needs It?

- Any person, whether inside or outside of California, engaging in the sale or distribution of pesticides labeled for agricultural use in California (except persons already licensed as a pest control dealer or registrant selling his/her own registered product). All pesticides offered for sale or sold in California must be registered by the Director of the Department of Pesticide Regulation (DPR).
- A Pest Control Dealer License is required if the sales are directly to end users.

Exemptions: Persons who operate only as sellers or distributors of a California-registered pesticides that are labeled only for nonagricultural use do not require a Pesticide Broker License or a Pest Control Dealer License.

What's Required to Obtain the License?

- Have a Pesticide Broker License issued for each principal and branch location (FAC section 12848.1)
- Fictitious Business Name Statement from the County Clerk's Office (FAC section 12103)
- Certificate of Good Standing for companies that are California or foreign corporations registered in California obtained for a fee from the Secretary of State. Corporations incorporated out-of-state must submit a Certificate of
 Good Standing from that state
- License fee of \$110.00 per year for the principal location and \$60.00 per year for each branch location (FAC section 12401)

Additional Requirements When Licensed!

- If the mill assessment has not been paid by the registrant, the pesticide broker or pest control dealer must pay a quarterly assessment to the Director of the Department of Pesticide Regulation, based upon the total dollars of sales for sales into or within California, of registered pesticides labeled for agricultural use. Also, the first person who sold this product into or within California must list by line item, the amount due to DPR
- Retain records of all purchases, sales, and distribution of pesticides for four years at the principal place of business (FAC section 12848.9)
- Submit a quarterly report to the Director, the total dollars of sales and total pounds or gallons sold into or within California of pesticides intended for agricultural use (FAC section 12848.9)

References: Food and Agricultural Code sections 12401 - 12404, 12848.9.

STATE OF CALIFORNIA DEPARTMENT OF PESTICIDE REGULATION 1001 I STREET SACRAMENTO, CA 95814-2828 Web site: http://www.cdpr.ca.gov

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VISA / MASTERCARD TRANSACTION





Continuing Education Sponsors:

INSTRUCTIONS:

Licensees:

(City, State, and ZIP Code)

- 1. For conducting transactions using VISA or MasterCard only. No other cards are accepted.
- 2. Complete *ALL* cardholder information.
- 3. If you have any questions, please call the Licensing and Certification Program at (916) 445-4038.
- 4. Mail your completed application with this form to the appropriate address below:

ATTN: Cashier Department of Pesticide Regulation P.O. Box 4015 Sacramento, CA 95812-4015						Cashier ATTN: CE Department of Pesticide Regulation P.O. Box 4015 Sacramento, CA 95812-4015																				
5. DO NOT FA	X this	forr	n to	DPF	3																					
NAME OF CARDHOLD	DER (NA	AME A	APPE	ARING	ON :	THE B	ANK C	(ARD))							CHEC	CK ON	NE			T	ODAY	'S DA	TE		
																	VISA	ı		MasterCar	d					
BANK CARD																	BANK	CAF	RD EX	(PIRATION DA	ATE T	DTAL	AMOL	JNT OF	PAYM	EN
NUMBER (16 DIGITS)																										
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FOR PAYMENT O	DF:																									
NAME OF LICEN	SEE (OR S	POI	NSOI	R																					
MAILING ADDRE	SS (S	Street	t or I	P.O. I	Box	Numb	oer)																			_

(DEPARTMENT USE ONLY) - ENTERED ON POS BY:	TODAY'S DATE	DATE MAILED	BY

California Environmental Protection Agency

Customer Service Survey

Our goal is to provide you with the best possible customer service. Your feedback telling us what is going well and what needs improvement is essential to our success to better serve you. We ask that you take a moment to complete the electronic customer service survey form at www.calepa.ca.gov/Customer/CSForm.asp. To assure that we receive your comments, please select "Department of Pesticide Regulation" and "Division of Pest Mgmt, Environmental Monitoring, Enforcement & Licensing" on the survey form. If you do not have access to the Internet and our electronic Customer Service Survey form, please feel free to write us at:

California Department of Pesticide Regulation Pest Management and Licensing Branch P.O. Box 4015 Sacramento, CA 95812-4015

Thank you for your feedback.